AO 440 (Rev. 10/93) Summons in a Civil Action			
RETURN OF SERVICE			
Service of the Summons and complaint was r	nade by mé ^{ll)} DA	ATE 12/17/09	
NAME OF SERVER (PRINT) Check one box below to indicate approp		THE LOGO ASC.	
☐ Served personally upon the defer			
discretion then residing therein.		use or usual place of abode with a person of	
Returned unexecuted:			
Other (specify):			
		IENT OF SERVICE FEES	
TRAVEL	SERVICES	8 /	TOTAL
	DECL	ARATION OF SERVER	
Executed on 12/17/69 Date	Prochni 7 S	eather Material Reserver ak Weisberg, P.C. Morton Ave.	
SENDER: COMPLETE THIS SECTION Complete items 1, 2, and 3. Also item 4 if Restricted Delivery is do print your name and address on so that we can return the card to Attach this card to the back of to or on the front if space permits. 1. Article Addressed to: CMC Mod yay	o complete esired. I the reverse o you. The mailpiece,	A. Signature X. M. M. M. R. T. G. A. G. C. O. B. Received by (Printed Name) D. Is delivery address different from item 17 If YES, enter delivery address below:	Agent Addressee Date of Delivery Yes No
800 State H 121 Bypars Lewisville, TX	75067	3. Service Type X Certified Mail Express Mail Registered Return Receipt f Insured Mail C.O.D. 4. Restricted Delivery? (Extra Fee)	or Merchandise
2. Article Number (Transfer from service label)	7008	3230 0000 1652 7028	
PS Form 3811. February 2004		Return Receipt	102595-02-M-1540